



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

5/12/15

Lisa Goodanew  
1285 Robins Rd  
Hiawatha IA 52233

Dear Lisa,

This letter is in regards to the compliance check of your Level A, Registered Child Development Home completed on 5/1/15. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

- ☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.  
**Issues are: you do not have documentation that your cribs are certified. I'm including the letter regarding the new law on cribs. You do need to have that certification showing your cribs meet the new requirements.**
- ☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.  
**You had medications, poisonous, toxic or otherwise unsafe materials within access of children. You had medications downstairs in your son's bedroom and the children could have access to this. These need to be in a location with secured access from children. Best practice is all medications and poisonous, toxic or otherwise unsafe materials be locked away from children.**
- ☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept. **You had been doing either a fire drill or a tornado drill. The requirements are that you do both, every month, and that you document them. You agree to start doing both fire and tornado drills monthly and documenting them.**
- ☐ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.  
**Need one in the following room: baby sleeping room in the basement.**
- ☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and [www.iowasmokefreeair.gov](http://www.iowasmokefreeair.gov). **Provider has no smoking signs on the inside of the home, right inside the doors. The signs are actually needed on the outside of the door so someone would see it before they enter the home. Suggest you contact CCRR and ask for their window clings.**
- ☐ 110.5(2) A provider file is maintained and contains:
- ☐ 110.5(2)a A physician's signed **statement of health and immunization status** on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every three years. **Need now every 3 years and on the new form for Lisa, Steve, and Zach. I left a copy of the new form for your use.**

☐ 110.5(2)c An individual file is maintained for each staff assistant and contains: **Need a file for the staff assistant(s)**

☐ 110.5(2)c A physician's signed statement of health and immunization status at the time of employment and at least every two years thereafter. **Need for Zach every 3 years and on the new form which I left a copy for your use.**

☐ 110.5(2)d An individual file is maintained for each substitute and contains: : **Need for Zach every 3 years and on the new form which I left a copy for your use.**

☐ 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter. : **Need now every 3 years and on the new form which I left a copy for your use.**

#### 110.5(8) Children's Files

110.5(8) An individual file is maintained for each child and **updated annually or when there are changes.** Each file contains: **The children's files must be updated annually with the emergency medical authorization completed yearly. If the parent wants to review, edit and re-sign and date the intake and emergency medical authorization instead of completing a new form that is ok. I suggest you pick a date, such as the first of the year, beginning of school, your birthday or anniversary, Valentine's Day, etc. On that date I suggest you double check for a current physical form and immunizations (if there were any updates) and have the parents redo or re-sign the emergency medical and intake information.**

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.  
**4 of your children needed their annual update CD, AH, and both JB's**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency. **Need for 4 of your children needed their annual update CD, AH, and both JB's**

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment. **Need for: 4 of your children needed their annual update CD, AH, and both JB's .**

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian. **Need for: CD .**

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually. **Need for: AH .**

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical. **Need for: CD .**

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child. **Need for: 4 of your children needed their annual update CD, AH, and both JB's .**

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health. **Need for: Baby JB and RB.**

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since. **Need for: CD .**

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child. **You need written permission every time you leave the premises. The underlined items must be addressed each time. I suggest you use a general permission request and include trips as noted on the monthly calendar. Any special activities can be added to the calendar for that month. Then have each parent sign off on your monthly calendar with your routine trips, before the activities are completed.**

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: 45 days of receipt.**

X \_\_\_\_\_  
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6826 if you have any questions regarding this letter.

Sincerely,

Lisa Wesbrook  
Social Worker II

Irene Holzwarth  
Social Work Supervisor

**Always Remember:**

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://dhs.iowa.gov/sites/default/files/CC\\_Professional\\_Development.pdf](http://dhs.iowa.gov/sites/default/files/CC_Professional_Development.pdf) and you can sign up for training at <http://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).